

Los Angeles County | Department of Mental Health



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**DEPARTMENT OF
MENTAL HEALTH**
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SRL/SRTS FHIR R4 Integration Guide — New Providers

Document Information

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1. Introduction

What is SRL/SRTS?

The **Service Request Log (SRL)** is the LA County Department of Mental Health (DMH) electronic referral submission system for Contract Providers. The **Service Request Tracking System (SRTS)** is the comprehensive Dynamics 365-based application that manages the full lifecycle of service requests across DMH's provider network.

California Code of Regulations Title 9 §1810.405(f) requires documented tracking of initial requests for specialty mental health services. DMH Policy 202.43 establishes that all requests for newly-active clients must be clearly documented with specific data elements and timeframes for initial appointments.

Contract Providers submit referral data electronically through the **HIDEX Provider Access API** (a FHIR R4 REST API), which integrates with SRTS.

SRTS Features and Capabilities

SRTS provides comprehensive service request management including:

- **Real-time status tracking** — Track referrals from initial request through service delivery
- **Access to care compliance** — Ensures providers meet state-mandated appointment timeframes
- **Workflow automation** — Automated workflows for Full Service Partnership (FSP) authorizations, transfers, and disenrollments
- **Specialized programs support** — Dedicated workflows for:
 - Full Service Partnership (FSP) including Child, TAY, Adult, and Older Adult populations
 - Assisted Outpatient Treatment (AOT)
 - Co-Occurring Disorders Court (CODC)
 - Specialized Foster Care (SFC) and Multidisciplinary Assessment Team (MAT) for Katie A
 - Homeless, Housing, and Intensive Mobile Health Team (IMHT) FSP
 - Jail Linkage services
 - Countywide Resource Management (CRM)
- **Provider collaboration** — Transfer service requests between providers with full audit trails
- **Calendar integration** — Integrated with DMH's ACCESS appointment scheduling system
- **Quality assurance** — Enables DMH QA review of compliance with Access to Care regulations
- **Comprehensive reporting** — Real-time dashboards and historical data analysis

How It Works

1. Your EHR system authenticates with DMH using OAuth2 and a subscription key
2. You submit referral data as a FHIR R4 **ServiceRequest** resource
3. The API validates your submission against SRL business rules
4. The referral is created in SRTS (Dynamics 365)
5. You receive an **SRTS ID** (Dynamics 365 GUID) immediately in the response
6. The referral is persisted to the DMH FHIR store for reporting and queries

7. SRTS workflows manage the referral through its lifecycle (authorization, transfer, disposition, etc.)

Key Concepts

Term	Definition
SRTS	Service Request Tracking System — the Dynamics 365 application used by DMH
SRTS ID	A GUID assigned to each referral by Dynamics 365, returned in your API response
Program of Service	A 5-6 character code identifying the DMH program you are contracted to serve
Contract Provider (CP)	An external organization contracted with DMH to provide mental health services
BHSA	Behavioral Health Services Act — additional program enrollment data for certain referrals
AHDS	Azure Health Data Services — the FHIR R4 store backing the API

What You Need

- OAuth2 client credentials (provided by LACDMH CIOB)
- API subscription key for environment targeting (provided by LACDMH CIOB)
- Your assigned program code(s)
- A FHIR R4-capable HTTP client in your EHR system
- Familiarity with JSON and REST APIs

2. Getting Started

Onboarding Steps

1. **Request access** — Contact LACDMH CIOB to initiate the onboarding process, or open a ticket using the [HEAT Self Service portal](#)
2. **Receive credentials** — DMH provisions your OAuth2 and API access credentials (see the **API Credentials Reference** table in Section 3)
3. **Access sandbox** — Use the TEST environment to build and test your integration
4. **Certify** — Complete the validation checklist (Section 12) in the TEST environment
5. **Go live** — Receive production credentials and begin submitting referrals

3. Authentication

Every request to the HIDEX Provider Access API requires an OAuth2 bearer token obtained via the client credentials grant, plus an APIM subscription key. See the **API Credentials Reference** table below for what's provisioned and where each value is used.

Step 1: Acquire OAuth2 Access Token

```
POST https://login.microsoftonline.com/{tenant-id}/oauth2/v2.0/token
```

```
Content-Type: application/x-www-form-urlencoded
```

```
grant_type=client_credentials
&client_id={your-client-id}
&client_secret={your-client-secret}
&scope={your-resource-audience}
```

`{your-resource-audience}` is the Resource Audience value from the API Credentials Reference table below (e.g., `api://{resource/appID}/.default`).

Response:

```
{
  "token_type": "Bearer",
  "expires_in": 3600,
  "access_token": "eyJ0eXAiOiJKV1QiLCJhbGciOi..."
}
```

The access token contains claims including your `program_id` authorization.

Step 2: Include Both Headers on API Requests

Every API request requires **both** authentication headers:

```
GET /fhir/ServiceRequest/12345 HTTP/1.1
Host: hidex-test.dmh.lacounty.gov
Authorization: Bearer {access_token}
Ocp-Apim-Subscription-Key: {your-subscription-key}
Content-Type: application/fhir+json
```

Important Notes

- **OAuth2 tokens expire after 1 hour** — implement token caching and refresh logic
- **Subscription key** targets the specific environment (TEST, QA, or PRODUCTION)
- Your token's `program_id` claim must match the program codes in your submissions
- Store both credentials securely (treat them like passwords)
- If the program code doesn't match your authorization, you'll get HTTP 403 Forbidden
- Contact DMH HIDEK Support if you need to rotate your subscription key, or open a ticket using the [HEAT Self Service portal](#)
- Contact LACDMH CIOB for OAuth2 client credential provisioning

API Credentials Reference

The Integration Team provisions the following credentials for API access:

Item	Type	Scope	Value
Client ID	App Registration	Shared across TEST and QA	Your OAuth2 application identifier (<code>client_id</code>)
Client Secret	App Registration	Shared across TEST and QA	Your OAuth2 application secret (<code>client_secret</code>) — store securely
Tenant ID	Azure AD	Same for both TEST and QA	The Azure AD tenant identifier (<code>tenant_id</code>)
Resource Audience	OAuth2 Scope	Same for both TEST and QA	<code>api://{resource/appID}/.default</code> — used as the <code>scope</code> parameter in the token request
Base URL	Endpoint	Environment-specific	TEST: <code>https://hidex-test.dmh.lacounty.gov/healthcare</code> QA: <code>https://hidex-qa.dmh.lacounty.gov/healthcare</code>
APIM Subscription Key	API Management	Environment-specific	Sent as the <code>Ocp-Apim-Subscription-Key</code> header on every request

Note: Client ID, Client Secret, Tenant ID, and Resource Audience are shared across the TEST and QA environments. Base URL and the APIM Subscription Key are environment-specific — request separate values for TEST and QA.

4. Endpoint Configuration

Base URLs

Environment	Base URL	Purpose
TEST	<code>https://hidex-test.dmh.lacounty.gov/healthcare</code>	Integration testing and certification
QA	<code>https://hidex-qa.dmh.lacounty.gov/healthcare</code>	Pre-production validation
PRODUCTION	<code>https://hidex.dmh.lacounty.gov/healthcare</code>	Production

Production may also be accessed via APIM gateway. Contact LACDMH CIOB for APIM URLs and subscription keys.

API Operations

Operation	Method	Path	Description
Submit referral	POST	/fhir/ServiceRequest	Create a single service request referral
Submit batch	POST	/fhir/Bundle	Submit multiple referrals atomically

Required HTTP Headers

Header	Value	Required
Authorization	Bearer {access_token}	Yes
Ocp-Apim-Subscription-Key	{your-subscription-key}	Yes
Content-Type	application/fhir+json	Yes
Accept	application/fhir+json	Recommended

FHIR Version

All resources must conform to **FHIR R4 (4.0.1)**.

5. SRL Referral Data Model

A referral submission is a FHIR [ServiceRequest](#) resource that contains:

Core Fields

Field	FHIR Path	Required	Rules
Program of Service	extension[program-of-service]	Yes	5-6 alphanumeric chars
Request Date/Time	authoredOn	Yes	ISO 8601 dateTime
Priority	priority	Yes	urgent or routine
Request Reason	reasonCode[0].text	No	Max 300 chars
Comments	note[0].text	No	Max 1000 chars
Respond Staff	extension[request-respond-staff]	Yes	Max 80 chars, alphabetic only
Request Type	extension[request-type]	No	CodeSystem code

Client (Patient)

For new clients, include a **contained Patient** resource on the ServiceRequest:

Field	FHIR Path	Required	Rules
Last Name	<code>Patient.name[0].family</code>	Yes	Max 38 chars
First Name	<code>Patient.name[0].given[0]</code>	Yes	Max 38 chars
Date of Birth	<code>Patient.birthDate</code>	Yes	ISO date (YYYY-MM-DD)
Phone	<code>Patient.telecom[0].value</code>	No	10 digits exactly
Insurance Status	<code>Patient.extension[insurance-status]</code>	No	CodeSystem code
Preferred Language	<code>Patient.communication[0].language</code>	No	CodeSystem code

For existing clients (already in the system), use an external reference: `"subject": { "reference": "Patient/{ClientID}" }`

Referring Party (Practitioner)

Include a **contained Practitioner** resource:

Field	FHIR Path	Required	Rules
Last Name	<code>Practitioner.name[0].family</code>	Yes	Max 38 chars, alpha/hyphens/apostrophes
First Name	<code>Practitioner.name[0].given[0]</code>	Yes	Max 38 chars, alpha/hyphens/apostrophes
Phone	<code>Practitioner.telecom[0].value</code>	No	10 digits exactly
Role	<code>Practitioner.qualification[0].code</code>	Yes	CodeSystem code

Disposition (Optional)

If a disposition is known at time of referral, include it as an extension:

Field	FHIR Path	Rules
Disposition Type	<code>extension[disposition].extension[type]</code>	Valid CodeSystem code
Appointment Date	<code>extension[disposition].extension[appt-date]</code>	Required for appointment dispositions
Closure Reason	<code>extension[closure-reason]</code>	"01", "02", or "07" for appointments

Field	FHIR Path	Rules
Practitioner NPI	<code>extension[disposition].extension[practitioner-npi]</code>	10 digits exactly
First Offered Appt	<code>extension[disposition].extension[first-offered-appt-date]</code>	Required when earlier appt offered

Resource Profiles

Resource	Profile URL
ServiceRequest	<code>http://dmh.lacounty.gov/fhir/StructureDefinition/srl-service-request</code>
EpisodeOfCare	<code>http://dmh.lacounty.gov/fhir/StructureDefinition/bhsa-episode-of-care</code>

6. Submitting a Single Referral

Request

```
POST https://hidex-test.dmh.lacounty.gov/healthcare/ServiceRequest
Authorization: Bearer {access_token}
Ocp-Apim-Subscription-Key: {your-subscription-key}
Content-Type: application/fhir+json
```

Example: New Client Referral

```
{
  "resourceType": "ServiceRequest",
  "meta": {
    "profile": ["http://dmh.lacounty.gov/fhir/StructureDefinition/srl-service-request"]
  },
  "contained": [
    {
      "resourceType": "Patient",
      "id": "patient-1",
      "name": [{ "family": "Garcia", "given": ["Maria"] }],
      "birthDate": "1990-05-15",
      "telecom": [{ "system": "phone", "value": "3235551234" }],
      "communication": [{
        "language": {
          "coding": [{
            "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-language",
            "code": "SPA",
            "display": "Spanish"
          }]
        }
      }]
    }
  ]
}
```

```

    ]]
  }
}],
"extension": [{
  "url": "http://dmh.lacounty.gov/fhir/Extension/insurance-status",
  "valueCoding": {
    "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-insurance-
status",
    "code": "medi-cal"
  }
}]
},
{
  "resourceType": "Practitioner",
  "id": "practitioner-1",
  "name": [{ "family": "Smith", "given": ["John"] }],
  "telecom": [{ "system": "phone", "value": "2135559876" }],
  "qualification": [{
    "code": {
      "coding": [{
        "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-referring-
party-role",
        "code": "health-provider",
        "display": "Health Provider"
      }]
    }
  }]
}
}],
"status": "active",
"intent": "order",
"priority": "routine",
"subject": { "reference": "#patient-1" },
"requester": { "reference": "#practitioner-1" },
"authoredOn": "2026-01-15T14:30:00-08:00",
"reasonCode": [{ "text": "Client requesting services for anxiety" }],
"note": [{ "text": "Referred by primary care physician." }],
"extension": [
  {
    "url": "http://dmh.lacounty.gov/fhir/Extension/program-of-service",
    "valueCoding": {
      "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-program-of-
service",
      "code": "AB123"
    }
  },
  {
    "url": "http://dmh.lacounty.gov/fhir/Extension/request-type",
    "valueCoding": {
      "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-request-type",
      "code": "call"
    }
  }
]

```

```

    }
  },
  {
    "url": "http://dmh.lacounty.gov/fhir/Extension/request-respond-staff",
    "valueString": "Johnson"
  }
]
}

```

Successful Response (HTTP 201)

```

{
  "resourceType": "ServiceRequest",
  "id": "sr-abc12345",
  "meta": {
    "profile": ["http://dmh.lacounty.gov/fhir/StructureDefinition/srl-service-request"],
    "versionId": "1",
    "lastUpdated": "2026-01-15T22:30:05.123Z"
  },
  "identifier": [
    {
      "system": "http://dmh.lacounty.gov/fhir/identifier/srts-id",
      "value": "a1b2c3d4-e5f6-7890-abcd-ef1234567890"
    }
  ],
  "status": "active",
  "intent": "order",
  "priority": "routine",
  "subject": { "reference": "#patient-1" },
  "requester": { "reference": "#practitioner-1" },
  "authoredOn": "2026-01-15T14:30:00-08:00"
}

```

The **identifier** with system <http://dmh.lacounty.gov/fhir/identifier/srts-id> is your **SRTS ID**. Store this in your system for tracking.

7. Submitting Multiple Referrals (Bundle)

Submit multiple referrals in one atomic request using a FHIR transaction Bundle. If any entry fails validation, the entire Bundle is rejected — nothing is persisted.

Request

```
POST https://hidex-test.dmh.lacounty.gov/healthcare/Bundle
Authorization: Bearer {access_token}
Ocp-Apim-Subscription-Key: {your-subscription-key}
Content-Type: application/fhir+json
```

Structure

```
{
  "resourceType": "Bundle",
  "type": "transaction",
  "entry": [
    {
      "fullUrl": "urn:uuid:entry-1",
      "resource": { /* ServiceRequest resource */ },
      "request": { "method": "POST", "url": "ServiceRequest" }
    },
    {
      "fullUrl": "urn:uuid:entry-2",
      "resource": { /* Another ServiceRequest */ },
      "request": { "method": "POST", "url": "ServiceRequest" }
    }
  ]
}
```

Response (HTTP 200)

Each entry in the response includes its own SRTS ID:

```

{
  "resourceType": "Bundle",
  "type": "transaction-response",
  "entry": [
    {
      "response": { "status": "201 Created" },
      "resource": {
        "resourceType": "ServiceRequest",
        "identifier": [{
          "system": "http://dmh.lacounty.gov/fhir/identifier/srts-id",
          "value": "a1b2c3d4-e5f6-7890-abcd-ef1234567890"
        }]
      }
    }
  ]
}

```

8. SRTS ID — Cross-System Correlation

Every successful submission returns an **SRTS ID** — a Dynamics 365 GUID that identifies the referral across all DMH systems.

```

"identifier": [{
  "system": "http://dmh.lacounty.gov/fhir/identifier/srts-id",
  "value": "a1b2c3d4-e5f6-7890-abcd-ef1234567890"
}]

```

- Store this ID in your EHR for future reference
- Use it in any communication with DMH about the referral
- It is returned synchronously — no polling needed
- Each Bundle entry gets its own unique SRTS ID

9. BHSA Program Enrollment

Some referrals require BHSA (Behavioral Health Services Act) program enrollment data. This is submitted as a contained [EpisodeOfCare](#) resource linked via [supportingInfo](#).

When to Include BHSA Data

Include BHSA enrollment when your program requires tracking of:

- Program/Service Type enrollment
- Housing status

- Program enrollment and disenrollment dates

Conditional Requirements

Condition	What's Required
New referral (no referral category)	Program/Service Type is mandatory
Open referral (referral category set, no disposition)	Program/Service Type is mandatory
Enrollment date set, no disenrollment, no type	System defaults to fsp-icm
Unhoused status = "yes"	Living Situation is mandatory
Living situation = "other"	Other description is mandatory

Example: Referral with BHSA Enrollment

Include a contained EpisodeOfCare:

```
{
  "resourceType": "EpisodeOfCare",
  "id": "episode-1",
  "meta": {
    "profile": ["http://dmh.lacounty.gov/fhir/StructureDefinition/bhsa-episode-of-care"]
  },
  "status": "active",
  "patient": { "reference": "#patient-1" },
  "period": { "start": "2026-01-01" },
  "extension": [
    {
      "url": "http://dmh.lacounty.gov/fhir/Extension/program-service-type",
      "valueCoding": {
        "system": "http://dmh.lacounty.gov/fhir/CodeSystem/bhsa-program-service-type",
        "code": "fsp-icm",
        "display": "Adult FSP - Intensive Case Management"
      }
    },
    {
      "url": "http://dmh.lacounty.gov/fhir/Extension/unhoused-status",
      "valueCoding": {
        "system": "http://dmh.lacounty.gov/fhir/CodeSystem/bhsa-unhoused-status",
        "code": "yes"
      }
    },
    {
      "url": "http://dmh.lacounty.gov/fhir/Extension/living-situation",
      "valueCoding": {
```

```

      "system": "http://dmh.lacounty.gov/fhir/CodeSystem/bhsa-living-situation",
      "code": "shelter"
    }
  }
]
}

```

Then reference it from the ServiceRequest: `"supportingInfo": [{ "reference": "#episode-1" }]`

Living Situation Codes

Code	Display
at-risk-eviction	At risk of eviction
exiting-jail-hospital	Exiting jail/hospital into homelessness
street-encampment	Street/encampment
vehicle	Vehicle
motel	Motel
shelter	Shelter
ih-site	Interim Housing Program site
couchsurfing	Couchsurfing
other	Other (requires description)

10. Screening Questionnaires

Submit universal screening responses as a contained `QuestionnaireResponse` linked via `supportingInfo`.

Questionnaire Selection (by Client Age)

Age	Questionnaire	Canonical URL
21+	Adult Screening	http://fhir.dmh.lacounty.gov/Questionnaire/SRL-Adult-Screening
0-20 (self)	Youth Self Screening	http://fhir.dmh.lacounty.gov/Questionnaire/SRL-Youth-Self-Screening
0-20 (caregiver)	Youth Caregiver Screening	http://fhir.dmh.lacounty.gov/Questionnaire/SRL-Youth-Caregiver-Screening

Answer Values

All answers use CodeSystem <http://dmh.lacounty.gov/fhir/CodeSystem/srl-screening-answer>:

Code	Display	Score Weight
yes	Yes	Question's weight (typically 1)
no	No	0
unable-unwilling	Unable/Unwilling	0

Score Calculation

The system automatically calculates the total score: sum of weights for all "yes" answers. You do not need to calculate or submit the score.

Conditional Questions (Adult Only)

When Q7 = "yes", questions Q7a and Q7b become valid. They are ignored if Q7 ≠ "yes".

Example Structure

```
{
  "resourceType": "QuestionnaireResponse",
  "id": "screening-1",
  "questionnaire": "http://fhir.dmh.lacounty.gov/Questionnaire/SRL-Adult-Screening",
  "status": "completed",
  "authored": "2026-01-15T10:30:00-08:00",
  "subject": { "reference": "#patient-1" },
  "item": [
    {
      "linkId": "Q1",
      "answer": [{
        "valueCoding": {
          "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-screening-answer",
          "code": "yes"
        }
      }]
    },
    {
      "linkId": "Q2",
      "answer": [{
        "valueCoding": {
          "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-screening-answer",
          "code": "no"
        }
      }]
    }
  ]
}
```

```

    }
  ]
}

```

Reference from ServiceRequest: `"supportingInfo": [{ "reference": "#screening-1" }]`

11. Error Handling

All errors return a FHIR `OperationOutcome` resource with structured details.

Error Reference

HTTP Status	Issue Code	Meaning	What to Do
401	<code>login</code>	Missing/invalid subscription key	Check configuration and verify subscription key
403	<code>forbidden</code>	Program mismatch	Verify program-of-service matches your authorized <code>program_id</code>
422	<code>processing</code>	Validation failure	Fix the errors listed in the OperationOutcome
422	<code>code-invalid</code>	Invalid CodeSystem code	Use a valid code from the correct CodeSystem
503	<code>transient</code>	Dynamics/FHIR store down	Retry with exponential backoff (1s, 5s, 15s)

Example: Validation Error (HTTP 422)

```

{
  "resourceType": "OperationOutcome",
  "issue": [
    {
      "severity": "error",
      "code": "required",
      "expression": ["ServiceRequest.authoredOn"],
      "diagnostics": "Request date/time (authoredOn) is required."
    },
    {
      "severity": "error",
      "code": "value",
      "expression": ["ServiceRequest.extension:request-respond-staff"],
      "diagnostics": "RequestRespondStaff must contain only alphabetic characters.
Max 80 chars."
    }
  ]
}

```

```
]
}
```

Retry Strategy

For HTTP 503 (transient errors):

- Implement exponential backoff: 1s → 5s → 15s
- Maximum 3 retry attempts
- Safe to resubmit — if Dynamics was unreachable, nothing was persisted
- If errors persist beyond 5 minutes, contact LACDMH CIOB

12. Testing and Certification

Sandbox URLs

Environment	Base URL
TEST	https://hidex-test.dmh.lacounty.gov/healthcare

Using Your Program IDs

Important: Use your organization's assigned Program IDs in all environments (TEST, QA, and PRODUCTION).

Your subscription key is associated with the program code(s) your organization is authorized to submit for. These are your actual contracted program codes and should be used across all environments.

Program ID Requirements:

- Must match the **program-of-service** extension value in your ServiceRequest resources
- Your subscription key is associated with your authorized program code(s)
- Mismatch between your authorization and resource program results in HTTP 403 Forbidden
- Format: 5-6 alphanumeric characters (e.g., **AB123**, **12345A**)

Example Program ID in ServiceRequest:

```
{
  "extension": [
    {
      "url": "http://dmh.lacounty.gov/fhir/Extension/program-of-service",
      "valueCoding": {
        "system": "http://dmh.lacounty.gov/fhir/CodeSystem/srl-program-of-
service",
        "code": "AB123"
      }
    }
  ]
}
```

```
]
}
```

Testing Across Environments:

- **TEST Environment** - Use your assigned program IDs for integration testing
- **QA Environment** - Use your assigned program IDs for certification testing
- **PRODUCTION Environment** - Use your assigned program IDs for live operations

Note: The same program IDs work across all environments. There are no test-only or environment-specific program codes.

Certification Checklist

Complete these steps in the TEST environment before going to production:

Authentication

- Successfully acquire an OAuth2 access token
- Token refresh logic handles expiry correctly (tokens expire after 1 hour)
- Include both Authorization and Ocp-Apim-Subscription-Key headers on all requests
- Verify both credentials are stored securely in your application

Single Referral

- Submit a valid referral with a new client → receive HTTP 201 + SRTS ID
- Submit a referral with an existing client reference
- Submit an invalid referral → receive HTTP 422 with detailed errors

Batch Submission

- Submit a Bundle with 2+ referrals → receive HTTP 200 + SRTS IDs
- Submit a Bundle with one invalid entry → entire Bundle rejected (HTTP 422)

BHSA (if applicable)

- Submit a referral with EpisodeOfCare enrollment data
- Verify conditional field validation (unhoused → living situation)

Screening (if applicable)

- Submit a referral with Adult screening QuestionnaireResponse
- Submit a referral with Youth screening QuestionnaireResponse

Error Handling

- System handles 401 (re-authenticates or checks subscription key)
- System handles 403 (alerts operator)
- System handles 422 (displays errors to user)
- System handles 503 (retries with backoff)

Production Cutover

1. DMH reviews your certification results
2. Production credentials are issued
3. Update configuration to use PROD base URL
4. Perform supervised first submission
5. Begin regular operations

13. Quick Reference

Extension URLs

Extension	URL
Program of Service	http://dmh.lacounty.gov/fhir/Extension/program-of-service
Request Type	http://dmh.lacounty.gov/fhir/Extension/request-type
Request Respond Staff	http://dmh.lacounty.gov/fhir/Extension/request-respond-staff
Disposition	http://dmh.lacounty.gov/fhir/Extension/disposition
Closure Reason	http://dmh.lacounty.gov/fhir/Extension/closure-reason
Batch ID	http://dmh.lacounty.gov/fhir/Extension/batch-id
Program Service Type	http://dmh.lacounty.gov/fhir/Extension/program-service-type
Unhoused Status	http://dmh.lacounty.gov/fhir/Extension/unhoused-status
Living Situation	http://dmh.lacounty.gov/fhir/Extension/living-situation
Living Situation Other	http://dmh.lacounty.gov/fhir/Extension/living-situation-other
Referral Category	http://dmh.lacounty.gov/fhir/Extension/referral-category

CodeSystem URLs

CodeSystem	URL
Program of Service	http://dmh.lacounty.gov/fhir/CodeSystem/srl-program-of-service
Request Type	http://dmh.lacounty.gov/fhir/CodeSystem/srl-request-type
Disposition	http://dmh.lacounty.gov/fhir/CodeSystem/srl-disposition

CodeSystem	URL
Insurance Status	http://dmh.lacounty.gov/fhir/CodeSystem/srl-insurance-status
Referring Party Role	http://dmh.lacounty.gov/fhir/CodeSystem/srl-referring-party-role
Language	http://dmh.lacounty.gov/fhir/CodeSystem/srl-language
Client Type	http://dmh.lacounty.gov/fhir/CodeSystem/srl-client-type
Closure Reason	http://dmh.lacounty.gov/fhir/CodeSystem/srl-closure-reason
Screening Answer	http://dmh.lacounty.gov/fhir/CodeSystem/srl-screening-answer
BHSA Program Service Type	http://dmh.lacounty.gov/fhir/CodeSystem/bhsa-program-service-type
BHSA Living Situation	http://dmh.lacounty.gov/fhir/CodeSystem/bhsa-living-situation
BHSA Referral Category	http://dmh.lacounty.gov/fhir/CodeSystem/bhsa-referral-category

Identifier Systems

Identifier	System URL
SRTS ID	http://dmh.lacounty.gov/fhir/identifier/srts-id

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